

When Recorded Return to:

**CERTIFICATION OF APPROVAL FOR SPECIAL
VALUATION ON HISTORIC PROPERTY (CHAPTER 84.26 RCW)
LOCAL REVIEW BOARD**

Grantor(s) _____

Grantee(s) _____

Legal Description _____

Assessor's Property Tax Parcel or Account Number _____

Reference Numbers of Documents Assigned or Released _____

Property Owner _____

Mailing Address _____

City State Zip

This is to certify that the application for special valuation on historic property located on the above described property has been approved based on _____

(Local Review Signatures)

Approved Amount of Cost of Rehabilitation _____

Date Approved _____

This Certification of Approval must be forwarded to the County Assessor on or before
December 31st of the filing year with a copy of the Agreement.

For tax assistance, visit <http://dor.wa.gov> or call (800) 647-7706. To inquire about the availability of this document in an alternate format for the visually impaired, please call (360) 486-2342. Teletype (TTY) users may call (800) 451-7985.